

# FALL YOUTH VOLLEYBALL ACADEMY

**Mail to:**

Gladstone Parks, Recreation & Cultural Arts  
Attn: Youth Volleyball Academy  
6901 N. Holmes, Gladstone, MO 64118

**FEE:** \$70**LOCATION:****Oak Hill Day School**

7019 N Cherry St, Gladstone, MO  
64118

**REGISTRATION:**

September 15th – October 2nd

**AGES:** 2nd & 3rd Grade**Register online at:**

<http://gladstonemo.activityreg.com>

**PROGRAM INFO****Time:** 6:30-8:00pm**Session:** Tuesdays & Wednesdays

Total of 6 sessions from October 6th-  
October 28th

**6901 N. Holmes, Gladstone, MO 64118 | 816-423-4200 | [www.gladstone.mo.us/Recreation](http://www.gladstone.mo.us/Recreation)**

Child's Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Boy: ☐ Girl: ☐ Grade(2020/21): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Shirt Size: [ ☐ ] Youth Medium [ ☐ ] Youth Large [ ☐ ] Adult Small [ ☐ ] Adult Medium [ ☐ ] Adult Large [ ☐ ] Adult XL

By my signature on this form, I waive and release any and all rights to institute a claim against the City of Gladstone for any damages or injuries to my child which are not a result of negligence on the part of the City of Gladstone, their agents or employees, or any costs resulting therefore, in conjunction with my child's participation in the City of Gladstone **Youth Volleyball Academy**. I also acknowledge the City of Gladstone's right to capture and share pictures of my child for future marketing purposes.

Parent Signature: \_\_\_\_\_

Payment Type: [ ☐ ] Visa [ ☐ ] MasterCard [ ☐ ] Discover [ ☐ ] Cash [ ☐ ] Check [ ☐ ] Money Order

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_